



Automated Communication Exchange System Training Winter/Spring/Summer 2005

ACES Training

Sessions are conducted at CalPERS Regional Offices, providing hands-on internet transaction training to process **AESD-1, HBD-12, HBD -21, HBD-85**. This process saves you time and money, and streamlines your work process.

Instructions Complete the information on this page and the attached Security Agreement (for each new ACES student), and fax to **ACES Training Coordinator, (916) 795-3005**.

1) Employer Information:

Agency Name:

CalPERS Employer Code:

Address:

2) Employer Account Administrator:

Name:

Phone:

Email Address:

Fax:

3) Student Name(s): * * Complete an attached Security Agreement for each new ACES student. * *

Name:

Email Address:

Name

Email Address:

TRAINING SESSIONS:

Sacramento - Register by 3/28/05

Sacramento Headquarters Office: Lincoln Plaza, 400 P Street, Room 2348, Sacramento, CA 95814

Training Sessions Conducted April 11-15

☐ Health only or combined with Membership (Approx. 7hrs)

☐ Membership Only Session (Approximately 4 hrs)

San Jose - Register by 4/4/05

San Jose Regional Office: 181 Metro Drive, Suite 520 San Jose, CA 95110

Training Sessions Conducted April 18-22

☐ Health only or combined with Membership (Approx. 7hrs)

☐ Membership Only Session (Approximately 4 hrs)

Sacramento - Register by 4/25/05

Sacramento Headquarters Office: Lincoln Plaza, 400 P Street, Room 2348, Sacramento, CA 95814

Training Sessions Conducted May 9-13

☐ Health only or combined with Membership (Approx. 7hrs)

☐ Membership Only Session (Approximately 4 hrs)

San Bernardino - Register by 5/9/05**San Bernardino Regional Office: 650 East Hospitality Lane, Suite 330 San Bernardino, CA 92408****Training Sessions Conducted May 23-26**☐ Health only or combined with Membership (Approx. 7hrs)☐ Membership Only Session (Approximately 4 hrs)**Sacramento - Register by 5/31/05****Sacramento Headquarters Office: Lincoln Plaza, 400 P Street, Room 2348, Sacramento, CA 95814****Training Sessions Conducted June 13-17**☐ Health only or combined with Membership (Approx. 7hrs)☐ Membership Only Session (Approximately 4 hrs)**See Employers User Security Agreement Below**

CALIFORNIA PUBLIC EMPLOYEES' RETIREMENT SYSTEM EMPLOYERS USER SECURITY AGREEMENT

(TO BE COMPLETED BY EMPLOYER AND EMPLOYEE) (PLEASE PRINT CLEARLY)

EMPLOYEE		EMPLOYER
Employee Name:		Employer Name:
Employee Social Security Number:	Date of Birth	Employer Code (CalPERS):
Employee Business Address:		Employer Physical Address:
Employee Business Phone:	Employee Business Fax:	Employer Mailing Address:
Mother's Maiden Name (for identification purposes):		<i>Please circle all that apply:</i> Account Administrator Health Membership Payroll PA Billing
Email Address:		

By signing this document, the employee referenced above acknowledges reading, understanding, and agreeing to its contents and realizes the consequences of not complying with its terms.

The California Public Employees' Retirement System (CalPERS) collects personal information to administer the various programs, accessed through the Automated Communications Exchange System (ACES), for which it has responsibility. The information contained in CalPERS' records is confidential, and CalPERS is required by law to protect such information from unauthorized access, use, and disclosure.

I understand the following are my responsibilities:

1. As an employee of an External User, I may access and/or transmit information only when relevant and necessary in the ordinary course of performing my official duties. I may not access, transmit or use information from CalPERS' records for personal reasons. (Examples of inappropriate access or misuse of CalPERS' record information include, but are not limited to: making personal inquiries on my own records or those of my friends or relatives; accessing information about another person, including locating their residence address, for any reason that is not related to my job responsibilities.)
2. I may disclose CalPERS record information to individuals only when relevant and necessary in the ordinary course of performing my official duties. (Examples of unauthorized disclosures include, but are not limited to: telling someone the social security number of another person when it is not part of my job responsibilities.)
3. To keep my password and User Name (User ID) confidential. I must take reasonable precautions to maintain the secrecy of my password and User ID. Reasonable precautions include, but are not limited to: not telling or allowing others to view my password or User ID; securing my terminal with a password or locking device when it is unattended while I'm logged onto CalPERS' inquiry system; reporting any suspicious circumstances or unauthorized individuals I have observed in the work area to my supervisor; and notifying CalPERS, via completion of the Employer User Access Request form, when my User ID and Password should be deleted because my official duties no longer require access to the CalPERS inquiry system or I am separating from my position with the employer referenced above.

I have read and understand the security policies stated above. I acknowledge and agree to utilize all CalPERS' systems in accordance with the terms outlined in the California Public Employees' Retirement Law and CalPERS' business practices, policies, and procedures. I understand that failure to comply with these policies may result in revocation of my access to CalPERS' on-line records systems, adverse action, and/or civil or criminal liability under applicable laws. I further understand that I can undergo disciplinary action from my employer up to and including termination of employment.

I certify under penalty of perjury, under the laws of the State of California, that the information provided above is true and correct.

Executed at	City:	County:
Date:	Employee Signature:	
Date:	Employer Signature:	

This form must be completed for each employee using CalPERS on-line access and be available to CalPERS upon request. Forms must be RETAINED IN A SECURE WORK SITE LOCATION of the Employer, for the life of the Agreement and for five years following the deactivation or termination of the Agreement. CalPERS is to be notified immediately in the event that any of its sensitive or confidential information is subjected to unauthorized disclosure, modification or destruction.

PERS-AESD-43 (12/03)